

April 14, 2021

**TO: The Honorable Marvin Abney
Chair, House Finance Committee**

Members, House Finance Committee

STATEMENT OF MAUREEN MAIGRET RE: H6122, Article 12

I currently serve as Chair of the Long Term Care Coordinating Council and Chair its Aging Community Subcommittee which at the direction of the legislature prepared a comprehensive plan to promote the ability of our older adults to remain living in their own homes and communities when appropriate. Affordable and accessible home and community-based services are essential for older persons and persons living with disabilities to live safely at home where the vast majority prefer to remain.

I am pleased to enthusiastically support a number of proposals in Article 12 including amendments to RIGL40-8.9-9, the state long term care rebalancing system reform law, which will help the state work toward its goal of allocating a minimum of 50% of Medicaid long term care funding for persons age 65 and over and adults with disabilities to home and community-based care. The Article also addresses the need to provide greater options for providing specialized Medicaid services for persons with significant and serious mental health issues.

Since its enactment in 2008, the state has made only slow progress towards reaching the goal of expending 50% of Medicaid long term care spending on home and community services. The FY2020 Annual Long Term Services and Supports Performance Report shows state spending on home and community services for persons of all ages (excluding spending on persons with intellectual and developmental disabilities) at 28% and for persons age 65 and over at 22% of total long term care spending. According to the AARP Scorecard Report, the national average is 45%.

Section 4 of Article 12 addresses the need to meet the demand for more home care workers to support expansion of home and community-based services by providing wage pass throughs for direct care workers employed by home nursing care and home care providers by increasing the shift differential by \$0.19 per 15 minutes (\$.76/hour). This will serve to provide incentives for workers to accept weekend and evening and overnight shifts. The section also addresses the need to provide a trained home care workforce for persons with behavioral health needs in order to serve persons in less restrictive settings. It would provide an enhancement of \$.39 per 15 minutes (\$1.56/hour) for workers who have completed the 30-hour behavioral health certificate program offered by RI College or a training program determined to be in compliance by EOHHS.

Section 8 of Article 12 provides additional measures that will promote client choice in long term care settings. It increases the home and community maintenance of need allowance from 100% of the federal poverty level plus \$20 to 300% of the federal Social Security Income standard. This will allow persons seeking home and community services to have sufficient income to be able to pay living expenses and remain living at home. This is extremely important as housing costs continue to rise. In addition, it increases rates for shared living providers and will develop a

tiered reimbursement rate system for assisted living based on resident acuity, a method used by most states. It would also provide Medicaid reimbursement for Community Health Workers who have demonstrated value in improving health outcomes, accessing social services and reducing health care costs. These workers have been shown to be valuable members of the healthcare team particularly for persons with multiple chronic conditions and social care needs.

To address significant gaps in behavioral health, Section 8 would (1) revise fee-for-service Medicaid rates for nursing facilities by implementing a behavioral health per-diem add-on for particularly complex residents hospitalized for six months or more for facilities certified to provide enhanced levels of behavioral health and (2) establish an intensive, expanded Mental Health Psychiatric Rehabilitative Residential for assisting in transitioning persons with complex needs to less restrictive settings. Governor McKee's budget presents some forward-looking approaches for changes to reimbursement methodology which will serve to advance the state forward in its home and community services expansion efforts and to promote services in the least restrictive settings. I urge the House Finance Committee to support these well thought out proposals. Thank you.